GENESIS Accountable Care Organization

The **Genesis Accountable Care Organization (GACO)** network consists of over 100 Primary Care Providers and is supported by the NCQA-scored medical homes, which was put into place during 2011-2013. Existing referrals patterns to specialists have been left intact. Our care guidelines span the continuum of care, specifying care processes and metrics for physician office, home health, skilled care facilities, in-patient hospital, and emergency room.

Our ACO governance Board is 75% physician, and includes a community member. Beside the ACO Board, there are three physician-led committees that report to the Board: Finance and Contracting, Medical Management and Data, and Care Design.

INSURANCE CONTRACTS:

- Medicare (17,000 lives)
- Wellmark (7,000)
- United Health Care (2,500)
- Genesis Employee Health Plan (8,900)

Percent of savings to ACO from Insurance Contracts:

- Medicare 50%
- Wellmark 70%
- United 60%

COST SAVINGS

- GACO has already received incentive payments from two of our commercial insurance partners.
- GACO has established a distribution methodology that routes dollars to offset the cost of care coordination staff, as well as going to participating providers.

SCORECARDS: Calculated at ACO level, clinic level, and provider level. The scorecards are distributed quarterly and the second set was just released.

STRATEGIES

The Triple Aim informs our:

- Care guidelines
- Processes
- Choice of participating providers
- Measures and incentive payment plan

QUALITY MEASURES & GUIDELINES

- Transitions of care
- Cost of care
- Preventive services (cancer screening, immunizations, well exams)
- Diabetes
- Heart failure
- COPD
- Hypertension
- Asthma
- Pneumonia
- ADHD
- Migraine

MEDICAL HOME

- 30 health coaches and navigators
- Provide self-management support using behavioral-based techniques to patients with chronic diseases
- Manage transitions of patients seen in ERs or discharged from hospital

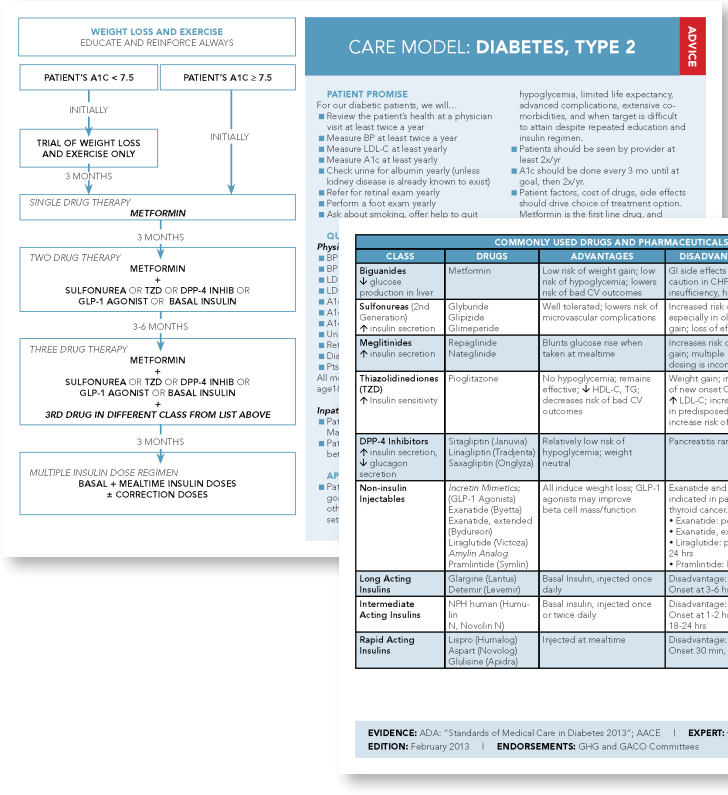
TRIPLE AIM: Improved Health, Improved Patient Experience, Lower Total Cost of Care

COMMUNITY INTEGRATION

- Our ACO nurse and program managers have met with community-based organizations, beginning a dialogue to find better ways to coordinate care.
- We are currently reviewing software that will allow qualified community-based professionals to view and make entries on patients.
- GACO has just partnered with a very large FQHC (Community Health Care) to broaden and deepen our ability to care for vulnerable populations.
- GACO is also partnering with other health systems across the state to create a clinical network to move patients seamlessly from PCP, to specialist, to university-level care.
- Genesis has embarked on a broad-based program of inventorying the community's health needs, and is working with community-based partners to address them.

LESSONS LEARNED AND SOLUTIONS:

- Genesis is building its own health information exchange to link physician EMRs.
- The clinical scorecards are another way to show physicians that "clinical integration" is a powerful tool to improve care at the population level.
- GACO's physician participation model is flexible, allowing employed and independent physicians to integrate.



CARE MODELS

- Practice guidelines for prevalent conditions, prevention and screening with built-in quality measures and tools

- Diabetes
- Heart failure
- COPD
- Hypertension
- Asthma
- Pneumonia
- ADHD
- Migraine